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		<b>Class</b>	<b>Subclass</b>
<b>TISSUE CLASSIFICATION</b>			

PATENT NUMBER

## U.S. UTILITY Patent Application

R O.I.P.E. Bx3 Q.A.	PATENT DATE
SCANNED Bx3 Q.A.	

APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/641793		368	G7	2859 2841	ROSKOSKI

## APPLICANTS

c; Noel Zeller

Travel alarm

**TITLE**

PTO-2040  
12/99

**ISSUING CLASSIFICATION**

[illegible]

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	<b>Sheets Drwg.</b>	<b>Figs. Drwg.</b>	<b>Print Fig.</b>	<b>Total Claims</b>	<b>Print Claim for O.G.</b>
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.  <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____  _____	_____ (Assistant Examiner) (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>	
				<b>ISSUE FEE</b>	
<b>Amount Due</b>				<b>Date Paid</b>	
<input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.	_____ (Primary Examiner) (Date)  _____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>	

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